

REMARKS/ARGUMENTS

The present Amendment is responsive to the final Office Action mailed May 11, 2007, in the above-identified application. A Request for Continued Examination (RCE) is also filed herewith.

Applicant thanks the Examiner and the Supervisory Examiner for the opportunity of a telephone interview conducted on July 31, 2007. During the interview, applicant's representative suggested that the cited references, Keime and Lang, do not disclose or suggest a pressure regulator operable to self-regulate the pressure applied to the exterior walls of the bag at a constant and predetermined level by regulating throughout a duration of the dispensing the pressure of the gas provided by the source of gas, as recited in claim 1 as now amended. The Examiners agreed that the rejections as written are overcome by claim 1 as amended. The foregoing will serve as applicant's statement of the substance of the Examiner interview.

Claims 3, 5, 6, 8, 12-14 and 16-18 are canceled without prejudice or disclaimer. New claim 20 is added. Thus, claims 1, 2, 4, 7, 9-11, 15, 19 and 20 are the claims currently pending in the present application.

Claim 1 is amended to clarify features recited thereby. Claims 2 and 4 are amended to conform them more closely to U.S. patent practice style.

Rejection of Claims 1-3, 9, 11 and 15 under 35 U.S.C. § 102

Claims 1-3, 9, 11 and 15 are rejected under 35 U.S.C. § 102(b) as being anticipated by Keime, GB 2,165,312. Reconsideration of this rejection is respectfully requested.

Claim 1 requires a pressure regulator operable to self-regulate the pressure applied to the exterior walls of the bag at a constant and predetermined level by regulating throughout a duration of the dispensing the pressure of the gas provided by the source of gas.

Thus, according to an aspect of applicant's invention as recited in claim 1, the pressure regulator is self-regulating, meaning, no feedback of the pressure provided from the outlet conduit of the medical bag is required to maintain the pressure at a constant and predetermined level. Accordingly, throughout the dispensing of the contents of the medical bag to the patient the pressure regulator is able to maintain a constant and predetermined level of pressure on the medical bag.

Keime discloses a portable self-contained injector for a perfusion device for injecting intravenous fluids into a patient in an emergency or accident situation. Keime discloses a relief valve 22 and a flow regulator 23 that is adapted for manually controlling the injection module outlet 24 (Keime, page 2, lines 29-36), and discloses that the gas reserve proves adequate to evacuate all the liquid contents of the bag 2 (Keime, page 2, lines 95-96). Keime discloses that the perfusion needle is introduced into the patient's skin and the gas cartridge is changed if necessary, and the next stage is to build up pressure (Keime, page 2, lines 76-80). After the needle is injected into the patient, pressure is built up by releasing gas via the manual flow regulator 23, so that the pressure is progressively shut down to about 10 millibars beyond the chosen pressure, after which the pressure is stabilized at the final level (Keime, page 2, lines 80-85). Keime further discloses steps to be taken when the pressure is exceeded so that there is no danger by virtue of the safety valve (Keime, page 2, lines 86-102).

The Office Action alleges that Keime discloses "a pressure regulator 23." However, reference numeral 23 is described by Keime as a flow regulator adapted for manual control (Keime, page 2, lines 32 and 38). As will be understood by a person of ordinary skill, a flow regulator of the type disclosed as pressure regulator 23 of Keime will not suffice to maintain the pressure applied to the exterior walls of the flexible bag at a constant and predetermined level.

Keime does not disclose or suggest that the pressure is maintained at a constant and predetermined level throughout the duration of the dispensing, as required by claim 1. As discussed, after the needle is injected, the pressure is increased to above the target pressure, then gradually decreased, and if necessary, decreased again.

Claims 2, 9, 11 and 15 depend from claim 1, and thus are patentably distinguishable over the cited art for at least the same reasons.

Rejection of Claims 1-4, 7, 10, 11 and 19 under 35 U.S.C. § 102

Claims 1-4, 7, 10, 11 and 19 are rejected under 35 U.S.C. § 102(b) as being anticipated by Laing, CA 2,083,555. Reconsideration of this rejection is respectfully requested.

Claim 1 requires a pressure regulator operable to self-regulate the pressure applied to the exterior walls of the bag at a constant and predetermined level by regulating the pressure of the gas provided by the source of gas.

Laing discloses an infusion device that includes a drug bag, a pumping device connected to an air bag, and an electronic control unit for controlling the operation of the pump (Laing, Abstract). Laing discloses a compact rigid housing 20 that includes an air bag 30 and a flexible container for medication 40 from which medication is dispensed (Laing, page 10, lines 23-28; Fig. 1). Laing discloses an air pump 58 connected to the air bag 30 and an impermeable member sock 65 which includes an isolation device 60, such that a control module 50 via a luer lock fitting 51 in direct relation with the transducer 55 is provided so that, as fluid fills the line 46 and sock 65, the air space 64 will experience a pressure above atmospheric pressure directly proportional to the pressure in the line 46 as medicament is delivered to the patient (Laing, page 12, lines 15-20). Thus, the transducer 55 will have available to it directly the pressure within the section 64, which can be communicated to the control unit 50. Control unit 50 may include a microprocessor 56, referencing preestablished set points in relation to the pressure in line 46, so that, should the pressure in line 45 be below the set point, the microprocessor 56 communicates to the air pump 58 to pump air from pump 58 through the line 35 into the air bag 30 (Laing, page 12, lines 20-28).

Laing does not disclose or suggest a pressure regulator operable to self-regulate the pressure applied to the exterior walls of the bag at a constant and predetermined level, as required by claim 1. As discussed, Laing requires a feedback apparatus involving several modules, including the impermeable member sock 65, control module 50, and microprocessor 56 to control the air pump 58 for pumping air into the air bag 30 to apply pressure to the flexible medication container 40, to maintain the air pressure between certain limits. Accordingly, Laing does not disclose or suggest the recitations of claim 1.

Claims 2, 4, 7, 10, 11 and 19 depend from claim 1, and are therefore patentably distinguishable over the cited art for at least the same reasons.

New Claim

Claim 20 is added so as more fully to claim patentable aspects of applicant's invention. Claim 20 is fully supported by applicant's disclosure, see, for example, Figs. 1, 3, 4 and 5.

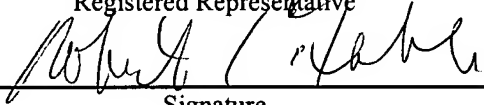
Further, claims 20 depends from claim 1, and is therefore patentably distinguishable over the cited art for at least the same reasons.

In view of the foregoing discussion, allowance of claims 1, 2, 4, 7, 9-11, 15, 19 and 20 is respectfully requested.

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on August 10, 2007:

Robert C. Faber

Name of applicant, assignee or
Registered Representative

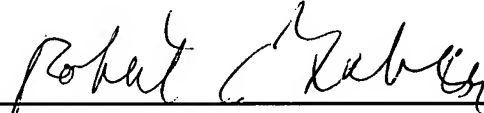


Signature

August 10, 2007

Date of Signature

Respectfully submitted,



Robert C. Faber

Registration No.: 24,322

OSTROLENK, FABER, GERB & SOFFEN, LLP

1180 Avenue of the Americas

New York, New York 10036-8403

Telephone: (212) 382-0700

RCF/GB:ns